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ABSTRACT

This practicum developed a workshop to educate staff and parents on identifying preschool stress, behavioral indicators of stress in children, and exploring effective stress coping techniques for use in the classroom and at home. A 3-phase solution strategy was implemented over 10 weeks. Phase I, the implementation process, included a staff meeting where the practicum was introduced and the process was discussed. Phase II, the workshop, gave general information including the definition of stress, causes of stress in preschoolers, behavior changes, and practical applications for coping techniques including the value of play, and prevention. Phase III, continued staff training, introduced coping techniques for the classroom. The results of the workshop showed that preschool staff and family members need and want information on stress and anxiety behaviors in preschool children. Parents responded positively to all presentations and showed interest and enthusiasm over resources available in the parent library. Training heightened teachers' sensitivity toward stressful situations not only with the children and their families, but also among the staff members themselves. (Nine appendices include parental and staff pre- and post tests, parent attendance and staff activity logs, staff evaluations of coping techniques, and the workshop outline. Contains 27 references.) (AP)

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ED 389 401

A Workshop for Staff and Families on Stressors and Anxious Behaviors in Preschool Children

by

Lynn E. Scardilli

Cohort 65

A Practicum Report Presented to the
Master's Program in Child Care, Youth Care and
Family Support in Partial Fulfillment of the Requirements
for the Degree of Master of Science

NOVA SOUTHEASTERN UNIVERSITY

1995

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ABSTRACT

A workshop for staff and families on stressors and anxious behaviors in preschoolers. Scardilli, Lynn E., 1995: Practicum Report, Nova Southeastern University, Master's Program in Life Span Care and Administration. Descriptors: Preschool Children; Preschool Education/ Stress Management/ Stress Variables/ Child Behavior/ Parenting Stress; Parent -Child Relationships/ Play/ Coping/ Inservice Teacher Education/ Workshops.

This practicum was designed to educate staff and parents on preschool stress and behavioral indicators. A major goal was to develop a workshop that would provide staff and parents with useful, practical knowledge and coping techniques to be utilized in the classroom and at home.

The writer implements a three phase solution strategy. This strategy includes a workshop for staff and families, staff training on affective coping techniques and the development of a resource library for use by parents and staff.

Appendices include parental and staff pre and post tests to measure knowledge gained form attending the workshop; attendance log; a daily staff activity log; a parent handout booklet; and a staff evaluation of coping techniques used in the classroom.

Authorship Statement

I hereby testify that this paper and the work it reports are entirely my own. Where it has been necessary to draw from the work of others, published or unpublished, I have acknowledged such work in accordance with accepted scholarly and editorial practice. I give testimony freely, out of respect for the scholarship of other workers in the field and in the hope that my own work, presented here, will earn similar respect.

July 26 1995 — Date

Lynn E. Scardella — Signature of Student

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CHAPTER I

INTRODUCTION AND BACKGROUND

The writer's work setting is a private, for profit preschool program serving children ages three to five years and their families. The program offers a full or half day program, Monday through Friday, 8 AM to 5 PM, September through June, at two locations. Each preschool, located eleven miles apart, leases space in church buildings and is centrally located in middle class neighborhoods.

Preschool #1 has a total enrollment of 50 children, however no more than 30 children attend at one time. This preschool employs one full time Head teacher and three full/part time assistants. The teacher holds a degree in Sociology and a teaching certificate as well. Each assistant has a minimum of an A.A. degree and one has a B.A. in Sociology.

In Preschool #2, a slightly larger facility, the enrollment is 65. On Monday, Wednesday, and Friday, there are two classes of four year olds with total enrollment for those days of no more than 40 children. There is

one three year old class held on Tuesdays and Thursdays with an enrollment of 25.

Preschool #2 employs one Head teacher that holds a B.A in Early Childhood Education and a second teacher for an additional four year old class. The second teacher holds a degree in Elementary Education and a M.S. in Special Education. There are two full/part time assistants and each one holds a B.A. in Elementary Education.

The writer serves as the owner and Director of both preschools. The writer purchased the business in 1981, totally unaware of the hurdles to be faced before settling into the comforts of the present locations. Once the purchase was complete, the writer relocated the original preschool to a location that would serve a larger market and enable expansion of the program to include full day students. Over the course of the next few years, the writer opened a second location. Both preschools have established a healthy reputation in both communities and the writer has since focused on developing a quality program.

Part of the writer's many responsibilities as director include staff development. All of the preschool employees are required to attend two outside seminars/workshops each year. This is a commitment the employees and I have made together. Additionally, I will conduct in-house training on such topics as developmentally appropriate practice, emergent curriculum, and assessment and evaluation techniques. Each training session was developed specifically to solve or prevent potential problems within the centers.

The preschool program has always been based on sound developmental practice. It is important to the writer, and to the children served, that each employee is fully knowledgeable about the stages of growth and development in preschool children. The ability to plan and carry out age appropriate activities is fundamental to our program. Through a workshop, new employees are trained in developmentally appropriate practice and veteran employees reinforce their knowledge and skills.

A training session on emergent curriculum was designed to solve a developing problem dealing with curriculum planning. We have always planned our

curriculum thematically with three lead teachers and myself brainstorming together to develop one major set of lesson plans to be used by all. Differences in backgrounds and personalities led me to believe that each teachers' uniqueness required a new approach to planning. By introducing the concept of emergent curriculum, allowing each teacher to develop her own set of plans from an agreed upon theme, the problem was resolved. The concept of webbing, brainstorming ideas, and incorporating all employees and children into the planning process were discussed and demonstrated.

Assessing and evaluating children developmentally also was an issue that required additional staff training. Teachers felt the need to assess children by "testing" each one, leading them through a series of well developed but very time consuming activities. The activities were stressful on the children because they were taken from play activities to a very structured, non-typical situation for long periods of time, plus the teachers were feeling the pressure of time constraints.

The resolution required introducing the staff to other assessment techniques. Specifically, observation

and recording children's natural behavior as they play and by interacting and extracting the childs' knowledge and skill level as he/she directed their own activities through play. This more natural method of assessment and evaluation carried out daily, has led to better teacher/child communication, less stress for children and staff, and eliminates altering the daily schedule of activities.

The writer's most interesting challenge occurred in June 1994. The program closes for the summer months usually around June 15 through the second week of September. Past attempts at summer programs have not been totally successful because of soft market demand. Last year the writer was approached by several parents of students graduating from the program inquiring about alternatives to summer school. Their children were too young for camps in our area. Parents were not interested in other preschool summer programs. They did not want something that required a major time commitment or something that was cost prohibitive. The writer's solution was called "Kid's Day Out".

"Kid's Day Out" is a fun, educational field trip designed specifically for the five year old graduates of our preschools. (This age group was the main focus of the program because this is the group where the problem originated.)

The "Kid's Day Out" proved to be a huge success. The writer is planning to expand the program.

CHAPTER II

PRACTICUM PROBLEM STATEMENT

It has become increasingly evident to the writer that there is an inability of adults -- staff and parents -- to identify and respond effectively to anxiety behaviors in preschoolers.

There are children presently enrolled in the program who are experiencing or have recently experienced a major crisis in their lives. A sudden death of a parent; a mother enduring chemotherapy; divorce and separation and long distance moves. These children are experiencing a tremendous amount of stress and they are reacting to it, in the classroom and at home. Parents and staff are finding that dealing with these children is frustrating, challenging, and stressful.

Staff and parents need to know more about anxiety and stress in preschoolers in order to help the child through stressful situations. Identifying and understanding stressors and the reactions preschoolers exhibit will help alleviate additional stress on the

child by educating the adult caregivers.(Chandler, 1981) Through new knowledge, the adults will gain an ability to predict and recognize childhood stressors and reactive behaviors, and they will learn to respond with stress free, apprcpriate adult understanding and behavior in return.

DOCUMENTATION OF THE PROBLEM

Current resources define stress in a variety of ways. The American Heritage Dictionary (1992) describes stress as "a mentally or emotionally disruptive or upsetting condition occurring in response to adverse external influences and capable of affecting physical health, usually characterized by increased heart rate, a rise in blood pressure, muscular tension, irritability and depression: a state of extreme difficulty, pressure, or strain" (p. 1178). Roget's 21st Century Thesaurus (1992) describes stress as "physical or mental pressure." with synonyms such as "agony, anxiety, apprehensiveness, fearfulness, impatience, mistrust, nervousness, overexertion, protraction, restlessness, strain, trauma, trepidation, urgency and worry" (p. 799). Humphrey & Humphrey (1985) concur that "stress can be considered as any factor acting internally or externally that makes it difficult to adapt and that induces increased effort on the part of a person to maintain a state of balance within himself and with his external environment" (p.4).

Stress has become a condition that everyone living

in a contemporary society must learn to recognize. Unfortunately, children cannot be excluded from this group. David Elkind (1981) states; "Today's child has become the unwilling, unintended victim of overwhelming stress - the stress borne of rapid, bewildering social change and constantly rising expectations" (p. 3).

Anxiety, the feeling or symptom manifesting from some external stressor, is a normal part of growth and development according to Stein, (1993). "Being anxious can be an adaptive symptom to the usual stress that children experience" (p. 20). Stress manifests itself in children in a variety of ways and becomes particularly disconcerting when it interferes with a childs ability to concentrate, to relate to their peers, to believe in themselves and to learn.

Parents and other significant adults are unaware of the magnitude and the multiplicity of stressors children are exposed to directly or indirectly on a daily basis. Elkind (1981) writes that "children are stressed by a wide variety of incidents - some positive, others benign, many negative" (p. 161).

By reading the literature it becomes clear to the writer that society in general, parents and care givers in particular, have put expectations and demands on children to grow up and except the pressures of life before they are developmentally ready to deal with those adult-like responsibilities. Elkind (1981) refers to these children as "hurried".

Hurried children are the products of hurried parents. Parents are hurried simply because of the society we live in. We are constantly in the throes of change. "Stress is an organisms' reaction to this change, this impermanence" (Elkind, 1981 p.26). Adults that are stressed become selfish. They become absorbed in themselves, their reactions and their feelings, leaving little if any room or energy to deal with children. Additionally, "Parenting has been found to be a generally stressful life event for both mothers and fathers" (Belsky, Spanier & Rovine, 1983, p.138).

Children have little control over many of the stressors in their lives. They have no control over marital discord, chronic illness, the birth of a sibling, a move to a new home, TV programming or death. Each of

the aforementioned stressors have had a direct affect on one or more children enrolled in the writer's preschool.

Observations of specific children experiencing a crisis situation in their lives demonstrates how children may react or respond in stress. How each child responds to stress depends on many different factors. How the child perceives the situation, the number of stressors imposed on the child, and how he/she is able to cope. (Humphrey & Humphrey, 1985)

Probably, one of the most traumatic events to occur in anyone's life is the accidental death of a close relative.

Previous to March 1994, a three year old boy enrolled in the writer's program was characterized as being bright, healthy and happy. He enjoyed school and participated in the activities offered. This child tended to be quiet but socialized well. He was well mannered and considerate of others. At home, he was the youngest of two boys, thriving in a two parent, two career family that lived in a middle class neighborhood.

Due to the sudden accidental death of his father, this child was absent from school for about one month.

When he returned, his attendance was sporadic for the rest of the school year, approximately six weeks.

The writer attempted to prepare the staff for this child's return to school by offering resources for dealing with death. Resources included information useful in talking to children about death and children's literature. The staff was apprehensive about this child's return because they had not had to deal with the issue of death before. Even with additional resources available to them, the staff was not comfortable with this situation.

When the child returned to school there were dramatic behavioral changes observed. Separation anxiety, aggressiveness, tearfulness and mistrust became characteristic behaviors. (Essa & Murray, 1994) Staff members were concerned about the child and his change in behavior. By using the provided resources, the staff could have helped themselves understand why the behaviors were present and how to help the child.

Summer vacation brought a twelve week break from school. The child returned in September more settled and visibly happier. Observations recorded much improved social behavior and intermittent separation anxiety.

After interviewing mother, it was learned that the family had entered into therapy and the youngest child was making the fastest recovery. Research concludes that preschoolers between the ages of three and five years have a limited understanding of death and "death does not appear to preoccupy them" (Menig - Peterson & McCabe, 1978, p. 74). The writer observed that once the mother had brought her stress under control, she was able to concentrate more on helping her children as was suggested by Elkind (1981) and Humphrey & Humphrey (1985).

In another case, the stress and anxiety caused by a parents' serious illness became a major concern of a three year old boy and the staff at the preschool. This child spent most of his young life being shuffled among extended family members for long periods of time. He was not only separated from his parents, but from his two siblings as well. Behaviorally, this child was aggressive, both verbally and physically. His play was rough and often caused other children to avoid him.

Some staff members found him to be a constant cause for concern. Their biggest fear was that he would seriously hurt another child or himself. They observed

that he refused to be comforted in any way when the need occurred, preferring to be alone. This behavior seemed to distance the child from any caring staff member even more. Reviews of literature by Teti, Nakagawa, Das, and Wirth (1991) state that "children who have secure attachments" with their mothers, "are presumed to develop working models of their caregivers as loving and responsive and themselves as worthy of love and support, which in turn are expected to exert positive influences on preschoolers judged to be securely attached in infancy have been found to be more prosocial and empathic in interactions with caregivers, unfamiliar adults and peers than have children with insure infant-mother attachments" (p. 440).

Out of frustration, some staff members used improper power techniques in the form of threats and "time - out". This action usually came after repeated verbal warnings about physical aggression. Parents also admitted that they used the same types of responses in order to gain control.

The writer understood the family history and present situation and shared this background information with the

staff members in order to help them understand the stress this child had been experiencing. According to Louis Chandler, (1981) "Teachers who know something of their students' lives outside the classroom are better equipped to supply extra support when children need it most" (p. 277).

A discussion and demonstration of positive behavioral techniques through modeling was implemented in order to help both the staff and the child in the short term. The staff failed to recognize that their stress caused by a lack of understanding of the child's previous experiences and this child's present negative behavior was only making the situation worse. Staff members were so self absorbed in their own feelings of frustration and rejection that they were not able to recognize the child's feelings of mistrust, anger, frustration and insecurity. Chandler (1981) suggests that "teachers and parents who seek to help children learn to cope with stress must first understand that adult perceptions of reality often differ from those of children. Moreover, adults are often guilty of attributing their own perceptions to the young. The communication problems that

result can cause children to feel isolated, anxious, inadequate or insecure" (p. 276).

The birth of a child is generally regarded as a positive family life event. Parents and other family members express great joy upon the arrival of a baby. However, this elation is not always shared by the new baby's older siblings. Because of the differences in how children and adults perceive events, many young children often respond in very puzzling and disturbing ways. Studies conducted by Tiffany Field & Martin Reite (1984) suggest that even when young children are prepared for the birth, many will still have negative responses to both the mother and new sibling. This study also reveals that visits to mother while she is in the hospital and increased involvement by the father, still had little effect on some children's negative behavior. "The arrival of a new sibling, a less active mother and changes in their play interactions may be viewed by children as situations over which they have little control" (Fields & Reite, 1984, p.1314).

The behaviors the writer has observed in children enrolled in three and four year old classes support the

findings of Field & Reite, (1984); increased clinging behavior, aggressiveness, changes in eating habits, toilet habits and sleep routines. Additionally, preschool children experiencing the stress of a new sibling, have been observed playing in the housekeeping area with dolls in negative ways. Statements such as "I'm going to put this baby in the oven and cook him to death!" and "I'm going to chop this baby's head off!" disturbed both staff members and parents alike. Field & Reite (1984) found that with the presence of a new sibling in their lives, "fantasy play and talk increased for children" (p. 1314). Piaget (1951) feels that play is therapeutic for children and a natural way of coping with stressful events.

ANALYSIS OF THE PROBLEM

The observations recorded in this practicum are only a sampling of the different types of stressors and responses preschool children experience. The stressors vary in severity and length and can make positive or negative impacts on a childs' life. Long term stress can become debilitating, hindering normal social and emotional development and even physical illness. How each child responds to the stressor and his ability to cope, depends on a great deal on his stage of development. (Humphrey & Humphrey, 1985)

The knowledge necessary for working with children includes understanding basic child development principles. Knowledge of how children grow, and what they need to develop socially, emotionally, physically and intellectually is essential for all childcare staff.

Attempts by the writer to demonstrate or suggest alternate methods of dealing with children under stress were well received by the staff. Observations by the

writer conclude that aides and parents were in most need of support and education. Further research into the background education of five aides and one teacher, indicated a weakness or lack of course work in child development. Even the aides (2) and teacher (1) with degrees in Elementary Education had little training in this area. Alternately, the two head teachers with degrees in Sociology and Early Childhood Education were most knowledgeable. They used effective techniques in behavior management strategies and made attempts to develop positive coping skills in children. The head teachers were lacking support from their staff mostly due to the differences in background education. These differences often caused occasional stressful situations within the classrooms.

Children want and need limits. They need discipline that is fair and consistent. Clear and simple rules stated in terms commensurate with the childs' ability to understand, gives the child a sense of security and the opportunity to control his own behavior. Inconsistent discipline encourages confusion in the child and his

adjustment to a situation can become difficult. Parents and caregivers need to learn to be more effective in positive discipline techniques. (Humphrey & Humphrey, 1985) (Morrison, 1991)

Head teachers were able to give positive support to parents as their concerns were voiced. The writer felt that the teachers were using appropriate child development principles when offering advice concerning behavior management techniques for parents, however, the correlation between parental stress and child stress was not identified as a factor for the child's behavior.

Parents and caregivers need to be able to identify common stressors for preschool children and the possible responses children may exhibit. Ignoring or punishing behavioral responses to stress is not an effective way to help the child. Recognizing that the behavior has a cause and by researching, uncovering that cause, adults are better able to help the child. Learning more about the child, his homelife and temperament through better communication can reveal stressful events or situations. This knowledge enables an adult to respond to the child with sensitivity and understanding. (Morrison, 1991)

Stress is a part of daily life. Parents and adults in general, need to identify the stressors in their own personal lives and to determine how this effects their child or the children they work with. Some children will experience more stress in their lives than others. Adults have the responsibility to learn to cope with their own stress as well as recognize and help children develop their own coping mechanisms.

Adults need to explore methods of coping with or relieving stress. Making time to relax, exercise, meditate or obtaining sufficient amounts of sleep are a few of the coping techniques available to adults. Parents need to understand that their busy, demanding lifestyles take a toll on children directly or indirectly. Taking the time to care for themselves will enable them to deal with their children's needs with patience and objectivity. Caregivers should also identify and develop more stress reducing activities to use in their daily curriculum. Activities including but not limited to physical exercise and increased free play activity outdoors. Additionally, reading books to children that

focus on specific stressful life events and positive, stress reducing transitional strategies to reduce behavior management problems. Activities should also be developed that help children identify when they are experiencing stress. Children can learn to recognize when their bodies are tense and they feel out of control. Breathing exercises, meditation, guided imagery and yoga activities for children have been found to help children develop positive coping techniques that they can learn to initiate when they feel the need. (Piper, 1988)

Adults should recognize the value of play as a means of reducing stress. Children need time at home and in school to work out their stress through playing. This can be accomplished with adults included in the play or alone. Child directed play allows children to play out what they do not understand. Through play children learn to cope with their world and attempt to make sense of it. In developmentally appropriate practice, play is the central theme behind good curriculum. Caregivers should be cautioned not to turn a child's play into work. Interfering with a child while he is playing, turning his personal interest into a learning situation, will often

turn the child off. He will often give up his play and ignore your attempts to teach. (Elkind, 1981)

Effective communication between parents and caregivers is important for helping the child through stressful experiences. Separation, divorce, death, birth, moving to a new home, TV shows, and real or imaginary fears may have some impact on preschoolers. Caregivers need to know about the childs life at home. Parents need to be more communicative when they see changes in their child's behavior that they do not understand or know how to handle. (Chandler, 1981)

Caregivers need to be sensitive to different parenting styles when communicating with parents. Being careful not to judge a parent's ability to parent, the staff needs to learn to offer sound advice along with resources pertinent to the situation. Expressing an understanding for the families through effective communication skills will enable the caregiver to have a better understanding of the child.

Caregivers need to have access to resource materials identifying childhood stressors, behavioral responses, parenting skills and effective coping strategies for

their own use in the classroom setting and for assisting parents with their concerns.

Cooperation, education and implementation are the necessary pathways to improving this practicum problem. Parents and staff members will benefit from working together to learn about the elements of preschool stress.

CHAPTER III

STATEMENT OF GENERAL GOALS

This practicum is designed to educate staff and parents about childhood stress. Through education, adults will learn to identify behaviors indicating stress in children and they will explore effective coping strategies.

Stress is a condition that adults and children alike experience and can learn to recognize and control. It is the optimal goal of the writer to inform adults that they have the responsibility to control their own stress and to help children deal with theirs.

Stress, if not managed, can affect physical and mental health. Stress can severely affect a child's ability to learn, to grow and to eventually function as a productive human being. It is the responsibility of all who care for children to understand the relevance and importance behind stress education.

STATEMENT OF BEHAVIORAL OBJECTIVES

1. The writer will develop a workshop on stressors and anxious behavior in preschool children to be attended by 100% of staff and at least 50% of parents.

2. As a result of training, parents knowledge of childhood stress will increase by at least 50% as measured by pre- and post training surveys.

3. As a result of training, staff knowledge of childhood stress will increase by at least 50%, as measured by pre-test and post test scores.

4. As a result of training, staff will devise and introduce into the curriculum three stress reducing strategies.

5. As a result of training, staff will implement developed strategies by averaging five stress related interventions per week, as indicated by staff charting.

CHAPTER IV

REVIEW OF EXISTING PROGRAMS, MODELS AND APPROACHES

Current literature reflects the need for adults to become knowledgeable of childhood stressors and their behavioral indicators. Adults need to develop a sensitivity to how children may perceive stressors and be supportive of the child's coping abilities.

David Elkind, (1981) in his book The Hurried Child tells us that we are putting pressure on children to grow up too fast. Expecting young children to perform before they are developmentally ready causes un-natural and harmful stress.

> "Growth into personhood in our contemporary society takes time and cannot be hurried. As we know it, growth occurs in a series of stages that are related to age. Each stage brings dramatic changes in intellectual capacity, in emotional attachment and in social relations. The elaboration of these new capacities in all their complexity and intricacy is a slow and deliberate process. When children are pressured to grow up fast, important achievements are skipped or by-passed, which can rise to serious problems later" (p. 118).

Elkind (1981) offers adults messages that need considerable thought and appropriate responses. The first is adults need to be polite to children. "Being polite to children helps them perceive hurrying in a less stressful way. Being polite to children is one of the most simple and effective ways of easing stress in children and of helping them to become thoughtful and sensitive people themselves" (p. 188).

A second suggestion offered by Elkind (1981) is that we have to understand that children perceive hurrying differently than adults. Adults need to de-center from our adult perspectives. When adults are stressed, they become ego centric and self-centered, often having trouble seeing the world from another person's point of view.

Elkind feels that children will assume many of the attitudes held by the adults in their lives. He writes "much of human stress and misery comes from dwelling in the the past, on what might have been, or in the future, on what will be.... We only have control over the

present, and this is where we need to direct our energies" (p. 198).

The writer agrees that often adults get caught up in their own problems and rarely understand the trickle down affect of stress. Young children do not have the capacity to understand the pressure and stress adults endure. Relationships to time, past or future are abstract concepts that preschoolers are not developmentally ready to understand. What they do perceive is how they are being treated in the present, today, now. A slip of the tongue, a harsh word, or just hurrying the child to move at a faster pace, all translate to the child.... rejection. What Elkind suggests is that adults pay attention. Be sensitive. Do not assume that you can hide your stress from your child or that it has little or no affect on him.

Elkind (1981), Seefeldt (1990) and Morrison (1991) value play as a natural way for children to deal with stress.

Elkind (1981) suggests that play is an antidote to hurrying, and "the value and the meaning of play are

poorly understood in our hurried society" (p. 193). Children are not afforded the opportunities for fantasy play or provided playthings that encourage their imaginations which help them cope with stress.

Georgianna Cornelius (1993) found that children from single and dual parent household exhibit different play behaviors with regard to varying levels of stress. "A mother experiencing high stress certainly has a different set of interactions than a mother with low levels of stress" (p. 14).

Cornelius (1993) reports the value of fantasy play for the child of a single parent family as a means of coping. This finding supports Elkind (1981), Seefeldt (1990) and Morrison (1991).

High levels of intervention on the part of the parent is not in the best interest of the child because the child looses control as director of his own play. This finding supports previous research by Sutton-Smith, (1971) indicating that parents should encourage children's fantasy play but not direct it. (Cornelius, 1993)

The writer agrees that play helps to develop the cognitive, social and emotional development of preschoolers. In order to make sense out their world, young children play act what is on their minds. The writer has found that many parents de-value play, by preferring their children to engage in activities that are structured for the child to "learn". Little freedom is afforded the child to just play. Parents' demanding work schedules, and/or extra activities for the children such as gymnastics or karate, dance etc. prevent the child from spending much quality time at home playing. The writer also feels that preschool staff need to understand the value of play and need to provide an environment and curriculum conducive to quality play time.

Literature reveals that there are many other stressors that are beyond the child's ability to control or cope with without assistance from knowledgeable, loving adults.

> "The events experienced by a family suggest and directly influence the behavior of the preschool child. Specifically, the

> personal psychological problems in a parent-like depression or severe stress are significantly related to the psychological problems and social behavior of children" (Stolberg and Ankler, 1984, p.3).

"One of the features of the changing American family, is the sizable number of families headed by a single parent" (Goldberg, Greenberger, Hamell, O'Neil, 1992). In their study, Goldberg et al. (1992) report that 27% of American families are single parent households with children under the age of eighteen years. As a result of the particular stressors they encounter, single mothers often report that feelings of depression, anger, helplessness and behavior problems in their children are not uncommon. This study found that role experiences for single women and their perceptions of their children improved when they had support from co-workers, family and friends. Economic stability, and quality childcare also helped to reduce the stress these women experienced.

Olson and Banyard (1993) found implications for supportive interventions with poor, single mothers of young children. Their study "Stop The World So I can Get Off For A While reveals specific stressors and the

behavior problems that their children exhibited on a daily basis.

> "Interactions with children were the most pervasive source of stress in the daily lives of these mothers. Of the many different types of child stressors that were reported, incidents of misbehavior such as non-compliance, defiance and rule infractions were most salient" (p. 54).

The authors suggested that parents keep a daily diary that would be a useful adjunct to counseling. The goal would be for parents to gain some objectivity on their life situations. Additionally, the diaries could also help mothers achieve insight into the types of coping strategies that seem effective in different situations. (Olson and Banyard, 1993) Providing additional childcare resources and helping parents to restructure interactions with their young children would also help these single parents.

The writer feels that recording a child's difficult behavior and the scenario in which that behavior takes place may be an aid to more effective parenting. The writer finds this information interesting and perhaps

useful for a workshop on discipline or parenting skills. Use of this model as a solution to the Practicum problem is not directly relevant.

The writer does feel that the information provided by Goldberg et al. (1992) and Olson & Banyard (1993) supports the need for parents and staff to understand how these life situations affect young children.

Tiffany Field and Martin Reite (1984) state that "very little is understood about the mechanisms underlying stress associated with temporary separations such as the mother's hospitalization or with the more permanent separation from those relationships that existed prior to the arrival of a new sibling" (p.1315).

According to Field and Reite (1984) a child's response to separation are characterized by agitation followed by depression. Physiological changes, such as increased heart rate and sleep pattern changes are responses associated with this type of stress. The parent report data of this study showed that children were more clinging and physically aggressive, experienced changes

in eating, toilet habits, sleeping patterns and illness.

The separation incident, perhaps the arrival of a new sibling, a less active mother and changes in routine including play, maybe viewed by children as situations over which they have little control. (Field & Reite, 1984)

In another study Field (1984) explored the relationship of stress to preschoolers moving to new schools and separating from teachers and peers. Her findings indicate that children experience the same type of stress and behavioral indicators as named in her study of separation of mother/child.

Although no practical applications were given for the use of this information, the writer feels that the studies presented by Field and Reite (1984) and Field (1984) support the need for parents and teachers to understand that this type of stress does exist in young children.

Death is another major stressor that confronts young children. "Children younger than age five do have some

understanding of death, particularly when they have had personal death related experiences" (Essa & Murray, 1994, p.74).

Research conducted over the past twenty years concludes that childrens' understanding of death involves comprehension of finality, inevitability, cessation of bodily functions and causality. Children between the ages of three and five have a limited understanding and an imperfect view of death. (Essa & Murray. 1994)

A child's reaction to the death of someone close may include guilt, sadness, anger, fear, hostility, clinging, regression to earlier behaviors, physical complaints and what may appear to be inappropriate outbursts. (Essa & Murray, 1994)

The literature suggests that caring adults help children understand in healthy ways through developmentally appropriate information. "Most researchers agree that some kind of death education sensitizes teachers to their own feelings and makes them more effective in helping children deal with death" (Essa & Murray, 1994, p. 78).

The use of bibliotherapy has been shown to effective as a coping techniques for preschool children. (Cherry, 1981)

> "Appropriate books should use direct and concrete words; involve the main character in death-related rituals, such as funerals; show respect for feelings and understand the grief of the characters; and end in a hopeful note, with life going on for the surviving characters" (Ordal, 1983,cited in Essa & Murray, p. 79).

Essa and Murray (1994) conclude that how young children respond to death will depend on many factors: age, cognitive maturity, their previous experience, and the kind of support they get from people around them. Successful coping with and understanding of death will help children deal with the inevitable losses they will encounter through life.

The writer agrees that the use of bibliotherapy for helping children to cope with stress is effective and practical. Books are easily used by parents and preschool staff and can cover a wide range of topics. Current research and literature available also addresses the need to help children develop their own effective coping

skills.

Louis Chandler (1981) suggests that instead of shielding children from stress, we as responsible adults should teach our children coping responses to deal with it. Chandler's (1981) advice is directed at teachers and offers suggestions for developing coping skills with children.

1. Provide a familiar environment. This gives the child a sense of security.

2. Follow a predictable schedule. This reduces the stress that comes from confronting the unknown.

3. Plan activities that allow children to experience success.

4. Set realistic goals.

5. Help children learn responsible behavior in a non-threatening way.

6. Encourage children to talk about their fears.

7. Know your students. Provide comfort and support to children who are facing stressful events.

Alice S. Honig (1986) writes that "parents and teachers who are sensitive to telltale signs of stress can tune in more effectively" (p. 55). In addition to

providing an extensive listing of "telltale signs", Honig offers adults suggestions that can help children cope with stress. Honig believes that caregivers need a variety of techniques available to them to help deal with the many different life situations that children may face. Suggestions include;

1. Develop adult noticing skills. Know the signs of stress.

2. Demonstrate self-control and coping skills yourself. Find social supports in your own life.

3. Enhance children's self-esteem.

4. Encourage children to develop a special skill or interest to serve as an inner source of pride and self-esteem.

5. Use proactive intervention to avoid unnecessary stress.

6. Help children improve skills in consequential thinking. Help them understand the consequences and implications of negative, acting out behaviors on others and on themselves.

7. Acknowledge children's feeling and encourage verbal mediation.

8. Help children distinguish reality from fantasy.

9. Use gentle humor.

10. Focus directly on the stressor.

11. Help children view their situation more positively.

12. Structure classroom activities to enhance cooperation.

13. Make choices and expectations easy to understand and to meet.

14. Find individual talk time.

15. Mobilize other children to help.

16. Use bibliotherapy.

17. Have regular classroom talks, in a safe calm atmosphere.

18. Use art.

19. Encourage children to act out coping skills through play.

20. Involve parents. (p. 55-57)

The writer agrees with Chandler and Honig. Stress is a part of life. Any effort to shield children from it will do the child a great injustice. Learning to deal with stress in positive constructive ways is a tool children can use for a lifetime. The writer also agrees with the suggestions offered by both researchers. The writer finds the information from Honig particularly

useful for developing the implementation portion of this Practicum.

Literature supports the idea of incorporating stress reducing coping strategies into daily living.

Think of Something Quiet by Clare Cherry (1981) provides a curriculum of stress reduction. "This curriculum teaches children about quiet to help them understand what tension is; what it feels like; what causes it; and what they can do on their own, as well as at the instigation of their teachers, to relax tensions and ease the symptoms of stress" (p. 5).

The basis for a low stress preschool program include concepts such as mutuality, self awareness, respect, trust, caring relationships and fantasy. All activities further support a program of humane, wholesome play-learning. (Cherry, 1981)

Humphrey and Humphrey (1985) believe that coping techniques should include nutrition and diet, physical exercise, sleep and rest. "Basic to the control of stress is the attention individuals pay to their own health and fitness" (p. 84).

Humphrey and Humphrey (1985) offer advice for controlling stress through diet. Adults modeling this healthy diet for children will train them to make healthy food choices. The authors also suggest providing food choices for children at a young age. This allows the child to make choices but prevents a child from forming set opinions on food likes and dislikes.

Physical activities for parents and children as provided by commercial programs i.e. Gymboree and others, show great benefit. Parents report feeling more relaxed themselves after participating in these activities. "Thus is is possible that this type of program provides for therapy for parents as well as physical well-being of their children" (Humphrey & Humphrey, 1985, p. 103).

Rest and sleep are also important elements to stress reduction. Children should have at least ten hours of sleep for every twenty-four. Humphrey and Humphrey, (1985) also believe that some sleep disorders in children can be traced to stressful conditions at bedtime. Bedtime should be a positive experience. Reading a story at bedtime can help lesson the impact of the sudden

separation between parent and child.

The writer agrees that physical activity, proper diet, and rest are all natural ways for coping with and controlling stress. The writer also feels that children can learn the value of healthy behavior with the help of health conscious adults. Relaxation techniques that teach the child to recognize his/her own tensions are also useful in developing practical solutions to stress. These techniques are not only useful in childhood but can assist the growing child in coping with stress throughout his life.

PROPOSED SOLUTION STRATEGY

The writer feels that a three phase solution strategy would be useful in helping staff and families understand childhood stressors and coping techniques. Research indicates that knowledge and understanding the causes and behavioral indicators of childhood stress is important. Staff and families need to recognize stress in children when they encounter it. Through new knowledge, adults can learn to modify their own behaviors, environments or attitudes to help eliminate stress in their children. Adults can learn what behaviors to look for and how to deal with stressful incidents that are unavoidable. Additionally, adults can help young children learn to cope with their own stress in healthy ways.

The writer chose the solution strategies discussed because of their ability to address a variety of existing and potential conditions in the most practical manner. The writer's experience in training staff and parents indicates a direct, yet practical approach is acceptable and desirable to the audience. The solutions are designed

to respond to generalities, not specific psychological or physical long term distress in children. The solutions are designed to give adults useful knowledge that they can incorporate into their daily lives to improve their parenting skills and to help their children deal with stress.

Phase 1

The writer will begin the implementation process by introducing the Practicum problem at a staff meeting. At this time, an overview of the implementation process will be discussed. The staff will take a pre-test (Appendix A) to indicate pre-training knowledge of childhood stressors and anxious behaviors.

Parents will be introduced to the Practicum project at a parent "coffee". At this time they will respond to a written survey in the form of Elkind's Stress Test for Children (Appendix B). This survey indicates to the parent that their young child could be experiencing stress in the present and will encourage interest in attending a workshop for more information. The parental interest level will be measured by a 50% attendance rate

at the workshop, to be recorded on an attendance sheet. (Appendix C)

Phase II

The workshop on childhood stressors and behavioral indicators in preschool children is designed to give general information to parents and staff. Included in the presentation will be a discussion of the definition of stress, what causes stress in preschoolers, behavior changes as signals, practical applications for coping techniques including the value of play, and preventions.

At the end of the workshop there will be an introduction of a lending library for the use of families facing stressful events. The library will offer resources for parents as well as an extensive collection of children's books. Research has shown that Bibliotherapy is useful and successful in helping children and adults cope in stressful situations.

The conclusion of the workshop will be the parents' responses to a survey (Appendix D). This survey will indicate the knowledge gained and the parents opinions of the usefulness of this new knowledge. As a result of

training, parent's knowledge of childhood stress will increase by 50% as measured by the pre and post workshop surveys.

Phase III

An April 7 staff meeting will enable the writer to introduce coping techniques that will be used in the classroom. The staff will examine resources such as books on designing play environments, guided imagery, Yoga exercises for children, and musical selections that encourage creative movement as well as provide a calming effect on children. The writer will discuss, demonstrate and provide examples to enhance the staff's knowledge and comfort with new techniques.

The writer will assist the staff in incorporating a variety of coping techniques in the daily program. The writer will observe the staff implementing their chosen stress relieving activities daily. The writer will document the progression of different techniques by photographing classrooms in action and by written observations.

The staff will be asked to record the techniques

they use on a daily basis by charting their activities on a log (Appendix E) from April 10 - May 12.

A staff meeting on May 12 will give the staff and the writer the opportunity to discuss the coping techniques implemented. Staff will evaluate each technique (Appendix F) used and will offer suggestions for further application. The writer will share her written observations, photographs and recommendations.

June 2 will be the last staff meeting at which time the staff will take a post-test (Appendix A). The results will be compared to the pre-test to determine whether 50% of new knowledge was gained from training.

Any need for modification or correction will occur around April 7, the beginning of Phase III. Up to this point the writer's dependance on staff has been minimal and routine.

The writer will assume that cooperation from all eight staff members will be forth coming and without question. In the event that full cooperation is not possible, the writer will assume the role of "facilitator" of stress reducing activities with a small

group of children. Staff would still benefit and gain knowledge about childhood stress by mandatory attendance at staff meetings and the workshop. The remainder of the implementation plan would remain the same.

CHAPTER V

STRATEGY EMPLOYED - ACTION TAKEN AND RESULTS

The goal of this Practicum was to educate staff and families about stress and anxiety behaviors in preschool children.

Over a period of ten weeks, the writer implemented all strategies that were planned and each objective was met.

Phase I of the implementation process included a staff meeting where the practicum was introduced and the process was discussed. At this meeting, the staff members took a pretest (Appendix A) to determine the extent of their knowledge on the topic before any new training occurred. The staff felt that the pretest was challenging. Each staff member completed the test and adequately answered all questions making the test a valid tool for indicating present knowledge.

The writer offered four "mini-workshops" termed "parent coffees" for the purpose of meeting parents in a small group setting and in a relaxed atmosphere. The meetings were held during preschool hours on four

different days so that parents could attend without their children or need of childcare. The mini-workshop was designed as a parent training strategy for the purpose of meeting the writer's Behavioral Objective #1. Each meeting was attended by eight or nine people. 34% of families enrolled attended a "parent coffee". After a brief presentation from the writer about the stress and anxiety behaviors in preschoolers, parents were asked to take Elkind's Stress Test for Children. After taking this test, parents were surprised to find that their children were experiencing much more stress than they had realized. Research by Elkind, Humphrey, and Cherry support the idea that children experience much more stress than adults know. Elkind's test proved to be a useful springboard for active participation in discussions and in developing a sensitivity to stressful events in children's lives.

The writer provided an evening presentation (outline Appendix G) for stress and anxiety behaviors in preschool children for those parents unable to attend the morning "coffee" meetings. The evening was less interactive but designed to be more formal and more informative. The

presentation was supplemented with a booklet (Appendix H) that included Elkind's Stress Test for Children, Honig's "Telltale Signs of Stress In Young Children", Methods of Effective Discipline, and a bibliography of parent/teacher resources available from the preschool library.

Parents took a great interest in the Parent Library concept and the selections available. By examining the literature available to them, many parents found books appropriate for their particular concern, or a selection to help their child with his/her problem. Feedback from parents using the specialized literature was positive and encouraging. Research by Essa & Murray shows that Bibliotherapy is very useful in helping children cope with stressful situations.

Parents took a post-training survey (Appendix D) to determine the value of the presentations. Survey results indicated that the presentations were informative and helpful. Comparisons of pre and post Parental Surveys indicated that parents knowledge increased by more than 50%, meeting the writer's objective #2.

Attendance record (Appendix C) showed that 31.5% of parents attended the evening presentation. It was interesting to note that few parents attended both the morning and evening presentations. The total percentage of families participating in this project equaled 65.5% surpassing the writer's goal of 50% as proposed in objective # 1.

Phase II also focused on training the staff on the use and implementation of relaxation and coping techniques in the classroom. Training was held during two regularly scheduled staff meetings. After being introduced to a variety of methods to reduce or control the stress levels in a preschool setting, staff were asked to implement five different strategies per week for a ten week period. Each strategy used was recorded and evaluated on an activity log by each staff member conducting the activity (Appendix E). Staff members were encouraged to experiment with a variety of different techniques. The writers' hope was to expand and enrich the staff's repetoire of activities for reducing stress. The writer also encouraged staff to use "everyday" activities in new ways as a means of stress reduction.

For example; music is often used to reinforce learning or to stimulate activity. The use of music to reduce stress is rarely used outside of scheduled rest periods.

The staff succeeded with experimenting with all the techniques introduced at staff training sessions, producing five stress reducing activities per week and meeting the writer's objective #5. The task of recording and critiquing each activity by each staff member was very valuable. Each staff member began to develop an ability to identify why an activity had succeeded or failed to get the desired response. Adjustments made to less successful activities proved more successful the following time with more children participating and an increase in the level of relaxation obtained. This finding is supported by author Clair Cherry in Think of Something Quiet.

After training and implementing many stress reducing activities, the staff as a group, selected three strategies to be included in the daily curriculum. Their choices included more vigorous gross motor play, meditation/visualization and transitional activities.

By following through with their selections and implementing them into the dialy curriculum, the staff met the writer's objective #4. These choices are also supported in literature by Humphreys, Cherry and Honig as appropriate outlets for stress.

A post-test for the staff, identical to the pre-test showed an increase of knowledge gained. Comparisons between the two tests indicated that staff members had a good understanding of what caused stress in preschool children but they did not know what to do about it. Literature by Elkind and Humphreys also identifies and explores this knowledge gap.

Answers to questions #3,4,5 & 6 on Appendix A showed increased knowledge of appropriate classroom techniques for reducing stress in children, and met the writer's objective # 3.

The staff met the writer's goal of 100% attendance and participation in all staff meetings and the evening presentation.

CHAPTER VI

CONCLUSION - IMPLICATIONS AND RECOMMENDATIONS

The outcome of this Practicum revealed that preschool staff and family members need and desire information on stress and anxiety behaviors in preschool children.

Families responded postively to all presentations and have shown interest and enthusiasm over accessible resources now available to them through the parent library.

The greatest change occurred within the teaching staff. Training heightened sensitivity toward stressful situations not only with the children and their families but within the staff members themselves. Staff began listening better to families as well as to the children and to each other.

The positive results from relaxation techniques used throughout the school day reinforced their own success. Teachers were pleased with their success of reducing stress and tension in the classroom and were eager to

continue expanding their collection of stress reducing activities.

In respect to the actual activities carried out by the staff, it should be noted that the following observations were discovered:

1. Group size was very important. The smaller the group, the more successful the activity.

2. When structuring a preschool program, the use of alternating active and passive activities helped reduce stress.

3. Pre-planning the environment was instrumental in the success of an activity. Quiet, smaller, carpeted areas free of furniture were most successful for relaxation techniques such as visualization and imagery.

4. Participation and relaxation increased as children familiarized themselves with the

activity. Repeating the activity within a few days increased the success of relaxation and participation even more. Children understood the instructions and were more focused on the activity than on the verbal instructions.

5. Activities that had fewer verbal instructions were most successful and very popular with the children. The three year old children asked to repeat these activities frequently.

6. Active gross motor activities were found to release tensions. These activities were particulary useful after a series of bad weather days.

7. The staff observed that many activities were extremely useful for transitional times between regularly scheduled activities.

Transitions were calmer and the children were able to begin the next activity faster.

8. The relaxation techniques the staff used with the children also helped them relax as well. One staff member noticed that her own voice lowered in volume and she felt calmer as a result.

9. The staff discovered that it is important to be realistic when choosing a technique. Not all stress reducing activities will be successful in all situations. Is it realistic to expect a guided imagery activity to be successful immediately following vigorus gross motor play?
Looking at the overall plan of daily events and planning for stress reducing activities that realistically fit into that plan increases the likelihood of success.

The writer feels that the small group model for parent training is the most effective means of communication. The small group atmosphere provided at the "parent coffee" was personal, relaxed, yet informative. Quiet music, comfortable seating in a living room atmosphere and refreshments gave parents an opportunity to relax, reflect and respond to the writer and to each other.

The writer plans on repeating the small group workshop in the future using the same topic and others. One sub-topic of stress that needs to be addressed is discipline. Although discipline was included in the evening presentation of this Practicum, it was not discussed in detail in small groups because of the lack of time and the nature of small group workshops.

The writer has been invited to discuss information about preschool stress in a parentling class offered by a local hospital. Most importantly to the writer, plans are being made to share this workshop with other preschool professionals. The writer is presenting a "small group" presentation for the local NAEYC chapter.

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APPENDIX A

STAFF PRE-TEST

1. List 10 stressors which may be present in the lives of preschoolers.

2. List 10 behavioral indicators of stress which may be present in the lives of preschoolers.

3. List 5 ways of controlling the physical environment to achieve reduction of stress in the classroom.

4. List 5 ways of promoting relaxation in the classroom.

5. List 5 ways of assisting children with expressing their feelings.

6. List 10 appropriate discipline techniques which could be used in your classroom.

APPENDIX B

Parent Survey

ELKIND'S STRESS TEST FOR YOUNG CHILDREN

Directions: Read through the list of stressors listed below. For each stressor that has affected your family or your child directly, give your child the appropriate amount of points as indicated under the points column. When you have completed the entire list, add up the score. "If your child's score was above 300 there is a strong likelihood he or she will experience a serious change in health and/or behavior." (Elkind, 1981)

STRESSOR	POINTS	CHILD'S SCORE
Parent dies	100	
Parents divorce	73	
Parents separate	65	
Parent travels as part of job	63	
Close family member dies	63	
Personal illness or injury	53	
Parent remarries	50	
Parent fired from job	47	

Parents reconcile	45
Mother goes to work	45
Mother becomes pregnant	40
School difficulties	39
Birth of a sibling	39
School readjustment (new teacher/class)	39
Change in families financial condition	38
Injury or illness of a close friend	37
Starts a new (or changes) extra-curricular activity (music lessons, Brownies,	36
Change in # of fights with siblings	35
Threatened by violence at school	31
Theft of personal possessions	30
Changes in responsibilities at home	30

Older brother/sister leaves home	29
Trouble with grandparents	29
Outstanding personal achievement	28
Move to another city	26
Move to another part of town	26
Receives or loses a pet	25
Changes personal habits	24
Trouble with teacher	24
Change in hours with babysitter or at childcare	20
Move to a new house	20
Changes to a new school	20
Changes play habits	19
Vacations with family	19
Changes friends	18
Attends summer camp	17
Changes sleeping habits	16

Change in # of family get togethers	15
Changes eating habits	15
Changes amount of TV viewing	13
Birthday party	12
Punished for not telling the truth	11

APPENDIX C

PARENT ATTENDANCE LOG

Parent's Name Child's Name

APPENDIX D

PARENT'S POST TRAINING SURVEY

Please indicate how strongly you feel about the questions on a scale of 1 - 5, with 5 being the strongest feeling and 1 being the least. Please circle the number which best indentifies your feelings.

1. Are you more aware that stress affects children?

5 4 3 2 1

2. Are you more aware of the stressors that may affect preschoolers?

5 4 3 2 1

3. Are you better able to identify behaviors that may indicate stress in preschoolers?

5 4 3 2 1

4. Will you be able to use any learned coping techniques with your children at home?

5 4 3 2 1

5. Are you aware that a child perceives situations differently than adults?

5 4 3 2 1

6. Do you have a better understanding of the value of play as a coping technique?

5 4 3 2 1

7. Are you more aware that you cannot hide your stress from your children?

5 4 3 2 1

APPENDIX E

DAILY STAFF ACTIVITY LOG

Date:_____

Name_____

Description of technique used:

What was successful about this activity:

What was unsuccessful about this activity:

Additional Comments:

APPENDIX F

STAFF EVALUATION OF COPING TECHNIQUES

1. Which coping strategies were successful in your classroom?

2. What made them successful and would you be able to use them in the future?

3. Which relaxation strategies were not used in your classroom and why?

4. Has the stress reduction curriculum improved your classroom management techniques? Give an example.

5. At what point during the day did you find the relaxation techniques most useful?

6. Were the coping strategies offered from available resources helpful and easy to implement?

7. What daily relaxation techniques will you continue to use on a daily basis?

APPENDIX G

WORKSHOP OUTLINE

I. What is stress?

A. Definitions

II. Stressed Adults: Let's talk about you

A. What's causing your stress?

1. Rapid change in society
   a. Human reaction to that change

2. Job dis-satisfaction
   a. seeking fulfillment through our children

3. Women / Role conflict
   a. women who work and don't want to
   b. women that can afford to stay at home
   c. women who try to do it all

4. Single parents
   a. the child as "partner"
   b. children as decision makers
   c. the child as therapist
   d. parental release of stress

III. Stressed Children

A. What's causing child stress?

1. The "trickle down" effect of parental stress

2. Common stressors
   a. Elkind's Stress Test for Children
   b. a child's perception vs. adult perception

IV. Behavioral Indicators

A. How do I know a child is experiencing stress?

1. Telltale signs; a handout

2. Responses vary according to personality and temperament

V. Coping Skills

A. How do you cope with stress?

1. Taking care of you.

B. How can you help your child cope with stress?

1. Play

2. Communication

3. Positive discipline

VI. Bibliotherapy

A. Parent lending library

APPENDIX H

A PRESENTATION FOR STAFF AND FAMILIES

ON

ANXIETY BEHAVIORS AND STRESS IN PRESCHOOL CHILDREN

PRESENTED BY

LYNN SCARDILLI

WEDNESDAY, APRIL 5, 1995

7:30 PM

APPENDIX B

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Parent travels as part of job	63	
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Personal illness or injury	53	
Parent remarries	50	
Parent fired from job	47	
Parents reconcile	45	
Mother goes to work	45	
Mother becomes pregnant	40	
School difficulties	39	
Birth of a sibling	39	

School readjustment (new teacher/class)	39
Change in families financial condition	38
Injury or illness of a close friend	37
Starts a new (or changes) extra-curricular activity (music lessons, Brownies,	36
Change in # of fights with siblings	35
Threatened by violence at school	31
Theft of personal possessions	30
Changes in responsibilities at home	30
Older brother/sister leaves home	29
Trouble with grandparents	29
Outstanding personal achievement	28
Move to another city	26
Move to another part of town	26
Receives or loses a pet	25
Changes personal habits	24
Trouble with teacher	24
Change in hours with babysitter or at childcare	20

Move to a new house	20
Changes to a new school	20
Changes play habits	19
Vacations with family	19
Changes friends	18
Attends summer camp	17
Changes sleeping habits	16
Change in # of family get togethers	15
Changes eating habits	15
Changes amount of TV viewing	13
Birthday party	12
Punished for not telling the truth	11

"TELLTALE SIGNS OF STRESS IN YOUNG CHILDREN"..
Honig, (1986)

Doesn't respond to friendly caregiver overtures

Daydreams frequently

Has grave, solemn face; rarely smiles or laughs. Has frequent prolonged temper tantrums

Cries a great deal for a month after entry into group care (even though caregivers have been gentle and responsive)

Acts sullen, defiant (says "I don't care" frequently when caregiver explains how misbehavior has hurt another)

Punishes self through slapping, head banging, or calling self bad names ("bad boy")

Is overly sensitive to mild criticism

Flinches if teacher or visiting adult approaches with caressing or reassuring gesture of outstretched arm

Report proudly to teacher that he or she has hurt another child

Is overly viligant about others' misdeeds, tattles, or jeers

Is highly demanding of adults although usually fairly self sufficient

Bullies or scapegoats and may get other children to join in

Carries out repetitive, sterotyped play that may have destructive aspects

Clings to, shadows caregiver, although in group for months

Is unable to carry out sustained play with preschool peers

Has constant need to sleep although physically well

Is preoccupied with frightening images of monsters or other violent, threatening figures

Has dull, vacant expression, as if trying to ward off thinking about stressful trauma or tries to deny

stressful feelings

Is hyperactive or restless, wanders around room, touches and disturbs toys and games, cannot settle into constructive play

Displays disturbed bodily functions, has trouble with feeding, constipation or diarrhea, soils self frequently, months after toilet training is completed

Has trembling of hands or facial twitches although apparently well.

Talks compulsively about physical danger and threats

Grinds teeth during naptime

Has rigid facial expressions from taut muscles

Displays loss of perceptual acuity

Displays reduced attentional capacity; even though caregiver is very clear in communicating, the child cannot focus well on activity or request

Stimulates self contantly (by prolonged thumb-sucking, masturbation, rocking body back and forth, or other such behaviors), which children normally do occasionally for self-comfort

Feels jittery

Stutters, uses disfluent speech, ore refuses to talk in group (older preschooler)

Is clumsy on easy manual tasks due to muscular tensions

Frequently acts aggressively against others, even adults

Has nightmares.

METHODS OF EFFECTIVE DISCIPLINE

The keys to effective discipline are to establish mutual respect and to expect cooperation. Children respond to respect and postivie expectations. The following methods can be used to discipline children effectively:

DISTRACTING THE CHILD

IGNORING MISBEHAVIOR WHEN APPROPRIATE

STRUCTURING THE ENVIRONMENT

CONTROLLING THE SITUATION, NOT THE CHILD

INVOLVING THE CHILD THROUGH CHOICES AND CONSEQUENCES

PLANNING TIME FOR LOVING

LETTING GO

INCREASING YOUR CONSISTENCY

NOTICING POSITIVE BEHAVIOR

EXCLUDING THE CHILD WITH TIME-OUT

In selecting an appropriate method, it's important to consider a child's developmental level. And while a particular technique may be appropriate for most children of a particular age, you'll want to consider in each situation the developmental age and level of understanding for your individual child. You will certainly find that with your child, some methods are more effective then others.

Parenting Young Children, Dinkmeyer, McKay, & Dinkmeyer. American Guidance Service, Inc. 1989.

SELECTIONS FROM THE PRESCHOOL CHILD DEVELOPMENT CENTER

LENDING LIBRARY

PARENT/TEACHER RESOURCES

A Parent's Guide To Child Safety, by Vincent J. Fontana

A Very Practical Guide To Discipline with Young Children, by Grace Mitchell

Do I Have A Daddy? A Story About A Single Parent Child, by Jeanne Lindsay

Getting Your Child To Sleep...And Back, by Vicki Lansky

Helping Children Cope with Death, by Joan Singleton Pristine

Helping Children Cope With Divorce, by Edward Tyber

Innocent Victims, by Thomas Whiteman

In Time And With Love, Caring For The Special Needs Baby, by Marilyn Segal

Love and Anger, The Parental Dilemma, by Nancy Samalin

Loving Your Child Is Not Enough, by Nancy Samalin

P.E.T. Parent Effectiveness Training, by Dr. Thomas Gordon

Pick Up Your Socks, A Practical Guide to Raising Responsible Children, by Elizabeth Crary

Positive Discipline for Preschoolers, by Nelson, Erwin and Duffy

101 Survival Tactics for New and Used Parents, by Ruth Lambert

The Hurried Child, by David Elkind

The Sleep Book for Tired Parents, by Rebecca Huntley

Who's Calling The Shots? by Carlsson-Paige and Levin

Welcoming Your Second Baby, by Vicki Lansky

PARENT/CHILD RESOURCES

MAJOR LIFE EVENTS

Birthday Presents, by Cynthia Rylant

Kevin and The School Nurse, by Martine Davison.

Maggie and Ther Energency Room, by Martine Davison.

Nathaniel Talking, by Eloise Greenfield.

Rita Goes To The Hospital, by Martine Davison.

Robby Visits the Doctor, by Martine Davison.

Sammy's Mommy Has Cancer, by Sherry Kohlenberg.

Someone Special Died, by Joanna Singleton Prestine.

The Berenstain Bears and Mama's New Job, by Stan and Jan Berenstain.

The Hospital, by Daphne Butler.

You're My Nikki, by Phyllis Rose Eisenberg.

EMOTIONS

Alexander and the Terrible, Horrible, No Good, Very Bad Day, by Judith Viorst

All My Feelings At Home, by Conlin & Friedman

Blueberries For Sal, by Robert McClosky

Clifford and The Grouchy Neighbors, by Norman Bridwell

Crabby Gabby, by Stephen Cosgrove

Ernie Gets Lost, by Liza Alexander

Eugene, by Sunny Griffin

Even If I Did Something Awful, by Barbara Shook Hazen

Grandfathers Lovesong, by Reeve Lindbergh

I LIke Me! by Nancy Carlson

I Want To Sleep In Your Bed! by Harriet Ziefert

I Was So Mad, by Norma Simm

Mean Soup, by Betsy Everitt

Rebecca, Margaret and Nasty Annie, by Jodie Silver

The Berenstain Bears and the Bad Dream, by Stan and Jan Berenstain

The Berenstain Bears and The Bully, by Stan and Jan Berenstain

The Berenstain Bears and The Greened Eyed Monster, by Stan and Jan Berenstain

The Don't Be Scared Book, by Ilse-Margaret Vogel

The New Baby, by Mercer Mayer

The Little Brute Family, by Russell Hoban

The Monster Under My Bed, by Suzanne Gruber

There's A Nighmare In My Closet, by Mercer Mayer

There's An Alligator Under My Bed, by Mercer Mayer

Try Again Sally Jane, by Gareth Stevens

Will I Have A Friend? by Miriam Cohen

BEHAVIORS

A Big Fat Enormous Lie, by Marjorie Weinman Sharmat

Alexander, by Harold Littledale

Duncan & Delores, by Barbara Samuels

Eat Your Peas Louise! by Pegeen Snow

Gregory The Terrible Eater, by Mitchell Sharmat

I Have To Go! by Robert Munsch

Ira Sleeps Over, by Bernard Waber

Night Noises, by Mem Fox

On Mother's Lap, by Ann Herbert Scott

Ooops! by Suzy Kline

Rotten Ralph, by Jack Gantos

The Berenstain Bears Get Into A Fight, by Stan & Jan Berenstain

The Berenstain Bears and The In-Crowd, by Stan & Jan Berenstain

There's A Hippopotamus Under My Bed, by Mike Thaler

The Wild Baby, by Barbro Lindgren

We Help Mommy, by Jean Cushman

APPENDIX I

CALENDAR PLAN

March 3, 1995

The writer will present the Practicum problem to the staff at a regularly scheduled staff meeting. During the course of the meeting, the staff will take a written pre-test. The results of the pre-test will indicate prior knowledge of stress and anxious behavior in preschool children. The writer will use the pre-test as a comparison measure to a post-test to be held at a later date.

March 1, 1995 - April 1, 1995

The writer will develop a workshop for staff and parents based on the research data found in the literature search.

March 8, 1995

The writer will send out invitations to parents, inviting them to a parent meeting. The invitation will

also include the first notice of the pending workshop on stressors and anxious behaviors in preschool children.

March 22 & 23, 1995

Writer will hold a parent meeting in each preschool location. The meeting will inform the parents of the Practicum project and pending workshop. Parents will be asked to fill out a survey created by the writer. This survey will indicate the parents' present knowledge of stress and anxious behaviors in preschool children. The results of this survey will be used as a comparison measure to a post-survey.

The writer will send out a second notice of the pending workshop.

April 5, 1995

The writer will present a workshop on stressors and anxious behavior in preschool children.

April 7, 1995

The writer will conduct a regularly scheduled staff meeting. During the meeting, the writer will issue the

staff a post-test to complete the measurement tool indicating what knowledge was gained from attending the stress workshop on April 5.

The writer and the staff will discuss stress reducing strategies to be used in the classroom. The writer will also provide the staff with additional resources for developing these strategies.

April 10 - May 12, 1995

The writer will assist the staff in planning for the implementation of three stress reducing strategies to be used weekly throughout the program. The writer will observe and photograph the planned activities.

May 12, 1995

At a regularly scheduled staff meeting, the writer will discuss with the staff the results of the implementation of stress reducing strategies in the classroom. The writer will also share the results of the pre and post tests and surveys completed by both the staff and the parents.